

Department of Motor Vehicle Safety

Commercial Vehicle Section
1200 Tradeport Blvd., Hapeville, GA 30354
Post Office Box 161227
Atlanta, GA 30321
(404) 363-6484
www.gadmvs.com

APPLICATION FOR MOTOR CARRIER OF PROPERTY PERMIT

New Intrastate Authority: For Motor Carriers Operating as "For Hire" Carriers within the State of Georgia.

INSTRUCTIONS

- Have the home office of your insurance company file a **Form E** (proof of commercial liability and property insurance) with this Agency. **THE NAME AND ADDRESS ON THE FORM E MUST READ EXACTLY AS APPLICATION READS.** (Minimum required: \$100,000/\$300,000/\$50,000) A Form E must be on file before authority will be granted.
- Include **\$50.00** registration fee in the form of a MONEY ORDER, CASHIER'S CHECK, and OR CERTIFIED CHECK. **NO COMPANY CHECKS OR PERSONAL CHECKS NOT WILL BE ACCEPTED.** No cash will be accepted in the mail. No refunds will be issued.
- Fill out and sign Form IR-1/IE-1 and remit \$5.00 per vehicle in addition to the \$50.00 registration fee
- If you are a corporation, attach a copy of your Certificate of Incorporation.
- The second page of the application and the Statement Certifying Identification of Vehicles must be notarized by a Notary Public. Applications not notarized will be returned.

Important Note:

If you are operating solely in the State of Georgia (not crossing state lines) with vehicles in excess of 10,000 GVWR **or** are transporting Placardable amounts of Hazardous Materials, you must complete the enclosed Application for Motor Carrier Identification Number for a U.S. Dot Number before you will be issued your authority. Do not separate paperwork. Please disregard if you have applied for or have been issued a U.S. DOT #.

CARRIERS THAT ALSO HOLD INTERSTATE REGULATED AUTHORITY:

(Single State Registration – ICC-MC#)

- Attach a copy of your Single State Registration Receipt (RS-3) showing trucks registered for Georgia. If you have paid vehicle fees through the Single State Registration DO NOT fill out the Form IR-1/IE-1 nor remit \$5.00 per vehicle.
- If you are a Georgia carrier with Federal Motor Carrier Safety Administration and have not registered that authority with the Department of Motor Vehicle Safety, call 404-559-6608 for instructions.

CARRIERS THAT ALSO HOLD INTERSTATE EXEMPT AUTHORITY: (Crossing state lines with exempt commodities)

- If you have purchased "bingo stamps" through the Department of Motor Vehicle Safety Interstate Exempt Registration DO NOT fill out Form IR-1/IE-1 nor remit \$5.00 per vehicle.
- If you do not have a U.S. DOT number, please call 404-562-3620 or 1-800-832-5660 for an application. Do not complete the Application for Motor Carrier Identification Number that is attached, it is for carriers that operate solely in Georgia.

Incomplete applications or applications submitted without proper attachments will be returned.

Allow 3 to 4 weeks for processing.

APPLICATION MUST BE ACCOMPANIED BY CASHIER'S CHECK, CERTIFIED CHECK, U.S. POSTAL MONEY ORDER OR EXPRESS MONEY ORDER PAYABLE TO "DEPARTMENT OF MOTOR VEHICLE SAFETY" IN THE SUM OF \$50.00. COMPANY OR PERSONAL CHECKS WILL NOT BE ACCEPTED. No Cash will be accepted in the mail.

APPLICATION FOR MOTOR CARRIER OF PROPERTY PERMIT

TO: Department of Motor Vehicle Safety
Motor Vehicle Section
Post Office Box 161227
Atlanta, GA 30321

DATE: _____

APPLICANT:

Name: _____

D/B/A: _____
(DOING/BUSINESS/AS)

Phone Number (____) _____ FAX Number (____) _____

PRINCIPAL PLACE OF BUSINESS ADDRESS:

Street _____

City _____ State _____ Zip _____

MAILING ADDRESS: (IF DIFFERENT FROM BUSINESS ADDRESS ABOVE)

Street _____

City _____ State _____ Zip _____

TYPE OF MOTOR CARRIER: (Check one)

☐ Individual

☐ Partnership

☐ Corporation

IF CORPORATION, ATTACH A COPY OF CERTIFICATION FROM Secretary of State or other agency in State where incorporated which shows approval of corporate name and give state in which incorporated:

List name of partners or officers:

Name: _____ Title: _____

Name: _____ Title: _____

Name: _____ Title: _____

TYPE OF MOTOR CARRIER OPERATION: (Check only one block)

☐ TRANSPORTATION OF PROPERTY – Using freight vehicles with a gross vehicle weight rating of 10,000 pounds or more.

☐ TRANSPORTATION OF PROPERTY: - Using only freight vehicles with a gross vehicle weight rating of less than 10,000 pounds.

☐ BOTH

HAZARDOUS MATERIALS:

() The applicant **will not haul** hazardous materials in any quantity.

() The applicant **will haul** hazardous materials.

If the applicant intends to haul hazardous materials, please enumerate below the products intended to be transported: _____

(Any items intended to be transported in bulk should be so designated)

PROCESS AGENT:

If your company is based in a state other than Georgia please list below your process agent for the state of Georgia.

Name _____ Street _____

City _____ State _____ Zip _____

INTERSTATE AUTHORITY: *Must be completed or application will be returned.*

Do you cross the state lines? () Yes () No

Do you hold authority from the Federal Highway Administration? () Yes () No

If the answer if Yes, please give your MC Number. MC _____

Does your company have a U.S. Dot Number? () Yes () No () Applied For

If Yes, please give your U.S.Dot Number. U.S. DOT No. _____

SAFETY AWARENESS: *Must be completed or application will be returned.*

Is your company familiar with the Department of Motor Vehicle Safety's safety **and/or** hazardous materials regulations and are you prepared to conduct your operation in accordance with these regulations? () **Yes** () **No**

Will your company maintain its vehicles used in transportation for compensation under its motor carrier of property permit in a safe operating condition and in compliance with the Department of Motor Vehicle Safety's safety and hazardous materials rules and regulations? () **Yes** () **No**

Please provide physical address of office or terminal where documents supporting your safety program can be inspected.

Please give a general overview of the types of equipment you intend to operate below; i.e., **refrigerated, tank vehicles, dump trucks, etc.**

I, the undersigned, under penalty for false statement, do hereby certify that the above information is true and correct and that I am authorized to execute and file this document on behalf of the above applicant. (State penalties as proscribed by law.)

Applicant's Signature and Title

Date

The area to the right must be completed by a Notary Public. Applicants do not write in this section.

Subscribed to and sworn before me:

This _____ day of _____,

20____.

Notary Signature and Seal

FORM IR-1/IE-1
Commercial Vehicle Permits – (404) 559-6607

Application For Registration Of Vehicles Operated By Motor Carriers Holding Certificates Or Permits Under The Jurisdiction Of The Department of Motor Vehicle Safety Pursuant To O.C.G.A. § 46-7-15, And; Motor Carriers Engaged In Intrastate Exempt Passenger Commerce Pursuant To O.C.G.A. § 46-1-1(9)(C)(Xiii).

MAIL TO:

**Department of Motor Vehicle Safety
Motor Vehicle Section
Post Office Box 161227
Atlanta, GA 30321**

Date: _____

MCA File No.: _____

(Leave blank if new carrier)

Phone No. _____

Applicant shown below hereby applies for the issuance of registration stamp(s) in the following number for the purpose of registering vehicle(s) which the applicant intends to operate within Georgia during the period for which such registration stamp(s) is effective.

2002 Vehicle Identification Stamps

NO. OF \$5.00
STAMPS ORDERED

\$5.00 Registration Stamp (for use in identifying and registering
ALL vehicles to be operated **entirely in intrastate commerce in Georgia**).
(ALLOW 3 TO 4 WEEKS FOR DELIVERY)

\$_____
FEE ENCLOSED

NOTE: ONLY CERTIFIED CHECKS, CASHIER'S CHECKS OR MONEY ORDERS
MADE PAYABLE TO: DEPARTMENT OF MOTOR VEHICLE SAFETY
COMPANY OR PERSONAL CHECKS WILL NOT BE ACCEPTED.
No cash will not be accepted in the mail.

The applicant shall not knowingly permit any other person or organization to use the registration and identification stamp(s) issued or assigned pursuant to this application. I, the undersigned, under penalty for false statement, do hereby certify that the above information is true and correct and that I am authorized to execute and file this document on behalf of the above applicant. (Penalties as provided by state law). I hereby certify knowledge of applicable Federal and State motor carrier safety rules, regulations, standards, and orders, and declare that all operations will be conducted in compliance therewith.

Applicant/Carrier

Street Address

Signature & Title

City

State

Zip

.....
IF YOU HAVE A PRINCIPLE ADDRESS AND A DIFFERENT MAILING ADDRESS, PLEASE ADVISE OF BOTH.

**PLEASE FILL IN PORTION BELOW FOR RETURN MAIL
(PRINT OR TYPE ONLY)**

APPLICANT: _____

ADDRESS: _____

CITY: _____ **STATE:** _____ **ZIP:** _____

DEPARTMENT OF MOTOR VEHICLE SAFETY
Motor Vehicle Section
1200 Tradeport Blvd., Hapeville, GA 30354
P.O. Box 161227, Atlanta, GA 30321

**STATEMENT OF SAFETY AWARENESS
MOTOR CARRIER CERTIFICATION**

For: _____
(Carrier Name)

I hereby certify knowledge of applicable Federal and State motor carrier safety rules, regulations, standards and order, and declare that all operations will be conducted in compliance with such requirements.

STATEMENT CERTIFYING IDENTIFICATION OF VEHICLES

I certify that all vehicles to be operated under the authority granted by the Department of Motor Vehicle Safety will be durably marked on both sides of the body or cab the vehicle, in letters and figures in sharp color contrast to the background and legible from a distance of 50 feet while the vehicle is not in motion, with the following information:

- (1) Legal name or single trade name;
- (2) Principle place of domicile (for vehicles with a GVWR under 10,000 lbs
or vehicles with a GVWR over 43,000 lbs.)^{1 2}
- (3) Assigned USDOT number (for vehicles with a GVWR over 10,000 lbs.)

Signed by: _____

(Title)

The area below must be completed by a Notary Public. Applicants do not write in this section.

Subscribed and sworn to before me,

This _____ day of _____,

20____.

(Notary Public)

¹ The city and state of your principal place of business.

² GVWR means the Gross Vehicle Weight Rating. This rating is applied by the vehicle manufacturer to the vehicle chassis and cannot be changed, except by the manufacturer.

Instructions for Completing the DMVS MCS-150 GA

1. Enter the legal name of the business entity (i.e., corporation, partnership, or individual) that owns or runs the motor vehicles.
2. Physical (street) address where the business is located.
- 3-5. City, state, and zip code where the above address is located.
6. If the business operates under another name than shown in Block 1, (such as a trade name or DBA name), enter that name here.
7. Mailing address, if different than the physical address.
- 8-10. City, state, and zip code for the mailing address.
11. County where the physical address is located.
12. Enter the telephone number of the business
13. If you are registered with the Department of Motor Vehicle Safety, and have been assigned a Motor Carrier Account (MCA) number, enter it here (Note: this is not the same as the permit number).
14. If you already have a U.S. DOT Number (Motor Carrier Identification Number), enter it here.
15. If you are a for-hire carrier engaged in interstate commerce, and have a ICC MC Number, enter it here.
16. Enter the Employer Identification Number (EIN) or Social Security Number (SSN) used to identify your business to the Internal Revenue Service and/or Georgia Department of Revenue.
17. Enter your Internet e-mail address, if you have one. Include the full address and domain name (e.g. yourname@domain.com).
18. Total fleet mileage last year for all vehicles shown in item 23, below, rounded to the nearest 10,000 miles.
19. Circle the appropriate type of operation:
 - A. *Interstate and/or foreign*, if you carry goods from outside Georgia destined for a location within Georgia (including air freight, overnight parcels, and/or U.S. Mail).
 - B. *Georgia Only (Hazardous Materials)*, if you operate vehicles that stay solely within Georgia, do not carry interstate or foreign freight, but do carry hazardous materials.
 - C. *Georgia Only (Non-Hazardous Materials)*, if you operate vehicles that stay solely within Georgia, do not carry interstate or foreign freight, but do *not* carry hazardous materials.
20. Operation Classification
 - A. *Authorized for hire*: If you have either ICC Authority, or hold a Certificate or Property Permit from the DMVS, or transport those commodities.
 - B. *Exempt for hire*: If you hold an Intrastate Exempt registration or Interstate Exempt (Class G) permit, or transport those commodities.
 - C. *Private (Property)*: If you transport goods or items to further any business or commercial (including non-profit) enterprise.
 - D. *Private Passengers (Business)*: If you transport passengers as part of a business (e.g., musical groups, retirement communities, etc.)
 - E. *Private Passengers (Non-Business)*: If you transport passengers *not* part of a business (e.g., churches)
 - F. *Migrant Workers*: If you transport 3 or more migrant workers, other than by passenger automobile or station wagon.
 - G. *U.S. Mail*: Transportation of mail under contract with the U.S. Postal Service
 - H. *Federal Government*: Transportation of passengers or property by a Federal Agency, on an agency owned, leased, or rented vehicle.
 - I. *State Government*: Transportation of passengers or property by a State Agency, on an agency owned, leased, or rented vehicle.
 - J. *Local Government*: Transportation of passengers or property by a Local (City or County) Agency, on an agency owned, leased, or rented vehicle.
 - K. *Indian Tribe*: Transportation of passengers or property by an Indian Tribe, on a Tribal owned, leased, or rented vehicle.
 - L. *Other*: Any operation not included above.
21. Circle the letters of all types of cargo carried in you operation. If "Other," enter the type.
22. Circle the types of hazardous materials carried, and whether carried in bulk packages (packages over 119 gallons capacity, such as cargo tanks, portable tanks, "totes," etc.), or smaller packages (119 gallons or less capacity, such as drums, boxes, cylinders, etc.), or both.
 IMPORTANT: These are survey codes to determine what types of materials your operation carries, they are not necessarily actual hazard classes.
 H: 2.1LPG (e.g., Propane)
 I: 2.1Methane (e.g., Natural gas, refrigerated liquid)
 K: Div. 2.2Ammonia (Anhydrous Ammonia)
 L – O: Div. 2.3 Poison gases in hazard zones A, B, C, or D.
 Q, R: Class 3 Flammable liquids also toxic by inhalation in hazard Zones A or B
 Z, AA: Div. 6.1 Poisons also toxic by inhalation in hazard Zones A or B
 GG, HH: Class 8 Corrosive materials also toxic by inhalation in hazard Zones A or B
23. Enter the total number of vehicles owned, term leased (more than 30 days), or trip leased (30 days or less), on the day this form is completed.
24. Enter the number of drivers that operate Interstate (across state lines) and Intrastate (within Georgia). Part time, casual, intermittent, and occasional drivers (including mechanics who test drive vehicles) are included. Also include the total number of drivers who hold Commercial Driver's Licenses (CDL).

Interstate: Drivers who carry people or materials across state lines, or who carry interstate freight (such as air freight, overnight parcels, and U.S. Mail).

Intrastate: Drivers who stay wholly within the State of Georgia, and do *not* carry interstate freight.

100 Mile: Drivers who normally stay within 100 *air* miles (*not* road miles) of their place of employment.
25. Print or type name, in the space provided, and sign, date, and include the Title of the individual authorized to sign documents for the company shown in block 1.

| | | | | | | | | |
|---|--|-------------------------------|-------------------------------|---|---------|--|----------|-------------------------|
| Department of Motor Vehicle Safety Motor Vehicle Section P.O. Box 161227 Atlanta, GA 30321 | | | | Application for Motor Carrier Identification Number (U.S. DOT Number) Form DMVS MCS-150 GA | | | | |
| 1. Name of Carrier | | | | 6. Doing Business As (DBA) Name (If any) | | | | |
| 2. Physical Street Address or Route Number | | | | 7. Mailing Address (such as P.O. Box) | | | | |
| 3. City | | 4. State | 5. Zip Code (Zip +4) | | 8. City | | 9. State | 10. Zip Code (Zip + 4) |
| 11. County | | 12. Phone Number () - | | 13. Georgia MCA# (If Known) | | 14. U. S. DOT # (If Known) | | 15. ICC MC # (If Known) |
| 16. IRS Tax Number EIN | | | 17. E-mail address SSN | | | 18. Carrier Mileage (Total Fleet Mileage Last Calendar Year) | | |
| 19. Carrier Operation (Circle all that apply) <div style="display: flex; justify-content: space-between;"> A. Interstate and/or Foreign B. Georgia Only (Hazardous Materials) C. Georgia Only (Non-Hazardous Materials) </div> | | | | | | | | |
| 20. Operation Classification <div style="display: flex; flex-wrap: wrap;"> <div style="width: 33%;">A. Authorized For Hire</div> <div style="width: 33%;">D. Private Passengers (Business)</div> <div style="width: 33%;">G. U.S. Mail</div> <div style="width: 33%;">J. Local Government</div> <div style="width: 33%;">B. Exempt For Hire</div> <div style="width: 33%;">E. Private Passengers (Non-Business)</div> <div style="width: 33%;">H. Federal Govt.</div> <div style="width: 33%;">K. Indian Tribe</div> <div style="width: 33%;">C. Private (Property)</div> <div style="width: 33%;">F. Migrant Workers</div> <div style="width: 33%;">I. State Govt.</div> <div style="width: 33%;">L. Other (Specify):</div> </div> | | | | | | | | |
| 21. Cargo Classifications (Please Circle all that Apply) <div style="display: flex; flex-wrap: wrap;"> <div style="width: 25%;">A. General Cargo</div> <div style="width: 25%;">G. Building Materials</div> <div style="width: 25%;">L. Intermodal Containers</div> <div style="width: 25%;">R. Meat</div> <div style="width: 25%;">X. Beverages</div> <div style="width: 25%;">DD. Other:</div> <div style="width: 25%;">B. Household Goods</div> <div style="width: 25%;">H. Mobile Homes</div> <div style="width: 25%;">M. Passengers</div> <div style="width: 25%;">S. Garbage, Refuse</div> <div style="width: 25%;">Y. Paper Products</div> <div style="width: 25%;">C. Metal Sheet, Coil, Roll</div> <div style="width: 25%;">I. Machinery, Large Objects</div> <div style="width: 25%;">N. Oil field Equipment</div> <div style="width: 25%;">T. U.S. Mail</div> <div style="width: 25%;">Z. Utility</div> <div style="width: 25%;">D. Motor Vehicles</div> <div style="width: 25%;">J. Fresh Produce</div> <div style="width: 25%;">O. Livestock</div> <div style="width: 25%;">U. Chemicals</div> <div style="width: 25%;">AA. Farm Supplies</div> <div style="width: 25%;">E. Driveaway/Towaway</div> <div style="width: 25%;">K. Liquids/Gases</div> <div style="width: 25%;">P. Grain, Feed, Hay</div> <div style="width: 25%;">V. Dry Bulk Commodities</div> <div style="width: 25%;">BB. Construction</div> <div style="width: 25%;">F. Logs, Poles, Beams, Lumber</div> <div style="width: 25%;">Q. Coal/Coke</div> <div style="width: 25%;">W. Refrigerated Food</div> <div style="width: 25%;">CC. Water Well Drilling</div> </div> | | | | | | | | |
| 22. Hazardous Materials Carried (Please Circle All that Apply) <div style="display: flex; justify-content: space-between;"> <div style="width: 45%;"> Explosives A. Div. 1.1 B NB B. Div. 1.2 B NB C. Div. 1.3 B NB D. Div. 1.4 B NB E. Div. 1.5 B NB F. Div. 1.6 B NB Gases G. Div. 2.1 B NB H. Div. 2.1 LPG B NB I. Div. 2.1 METHANE B NB J. Div. 2.2 B NB K. Div. 2.2 AMMONIA B NB L. DIV. 2.3A B NB M. DIV. 2.3B B NB N. DIV. 2.3C B NB O. DIV. 2.3D B NB </div> <div style="width: 45%;"> Flammable Liquids P Class 3 B NB Q. Class 3A B NB R. Class 3B B NB S. Combustible Liquid B NB Flammable Solids T. Div. 4.1 B NB U. Div. 4.2 B NB V. Div. 4.3 B NB Oxidizers/Organic Peroxides W. Div. 5.1 B NB X. Div. 5.2 B NB Poisons/Etiologic Agents Y. Div. 6.2 B NB Z. Div. 6.1A B NB AA. Div. 6.1B B NB BB. Div. 6.1 Liquid B NB CC. Div. 6.1 Solid B NB </div> <div style="width: 45%;"> Radioactive DD. Class 7 B NB EE. Highway Rte. Cont. Qty. B NB Corrosives FF. Class 8 B NB GG. Class 8A B NB HH. Class 8B B NB Other II. Class 9 B NB JJ. Elevated Temp. Materials B NB KK. Infectious Waste B NB LL. Marine Pollutants B NB MM. Hazardous Substances (RQ) B NB NN. Hazardous Waste B NB OO. ORM-D B NB </div> </div> | | | | | | | | |
| 23. Equipment Straight Trucks Truck Tractors Trailers HazMat Cargo Tank Trailers HazMat Cargo Tank Trucks Passengers <div style="display: flex; justify-content: space-between;"> <div style="width: 25%;">Owned</div> <div style="width: 25%;"></div> <div style="width: 25%;"></div> <div style="width: 25%;"></div> <div style="width: 25%;"></div> <div style="width: 25%;"></div> <div style="width: 25%;">Motor Coach</div> <div style="width: 25%;">School Bus</div> <div style="width: 25%;">Van / Mini-bus</div> <div style="width: 25%;">Limousine</div> </div> <div style="display: flex; justify-content: space-between;"> <div style="width: 25%;">Term Leased</div> <div style="width: 25%;"></div> <div style="width: 25%;"></div> <div style="width: 25%;"></div> <div style="width: 25%;"></div> <div style="width: 25%;"></div> <div style="width: 25%;"></div> <div style="width: 25%;"></div> <div style="width: 25%;"></div> <div style="width: 25%;"></div> </div> <div style="display: flex; justify-content: space-between;"> <div style="width: 25%;">Trip Leased</div> <div style="width: 25%;"></div> <div style="width: 25%;"></div> <div style="width: 25%;"></div> <div style="width: 25%;"></div> <div style="width: 25%;"></div> <div style="width: 25%;"></div> <div style="width: 25%;"></div> <div style="width: 25%;"></div> <div style="width: 25%;"></div> </div> | | | | | | | | |
| 24. Number of Drivers Subject to the Motor Carrier Safety and/or HazMat Regulations: <div style="display: flex; justify-content: space-between;"> <div style="width: 45%;"> INTERSTATE 100 Mile Radius _____ Beyond 100 Mile Radius _____ </div> <div style="width: 45%;"> INTRASTATE 100 Mile Radius _____ Beyond 100 Mile Radius _____ </div> </div> <div style="display: flex; justify-content: space-between;"> <div style="width: 45%;">Total Drivers _____</div> <div style="width: 45%;">Total CDL Drivers _____</div> </div> | | | | | | | | |
| 25. Certification Statement (to be completed by an authorized official) I, _____, certify that I am familiar with the Motor Carrier Safety Regulations and/or the Hazardous Materials Regulations. (Please Print Name) Under penalties of perjury, I declare that the information entered on this report is, to the best of my knowledge and belief, true, correct, and complete. | | | | | | | | |
| Signature: _____ Date: _____ Title: _____ | | | | | | | | |